

# Joint Committee on Health Policy Oversight: Health Reform 2009

November 20, 2008

Marcia Nielsen, PhD, MPH Executive Director



#### **Overview**

- Context for 2009 health reform recommendations
  - Budget shortfalls
  - Increasing number of uninsured
- Community dialogue tours: Kansans in need
  - 54 meetings in 11 communities
- Health reform recommendation details
- Improving outcomes and promoting cost effectiveness:
  - Medicaid transformation program reviews



# **Budget shortfall:** Current picture

- Department of Budget (DOB) initial reduction recommendations:
  - FY 2009: \$11.7 million SGF reduction; \$9.2 All funds
  - FY 2010: \$20.1 million SGF reduction; \$75.9 All funds
- Meeting budget targets:
  - Supplemental funding not included in DOB plan
  - Implementing administrative and operation cuts
  - Reducing SCHIP (carry-over \$) and reviewing contracts
  - Reviewing other recommendations



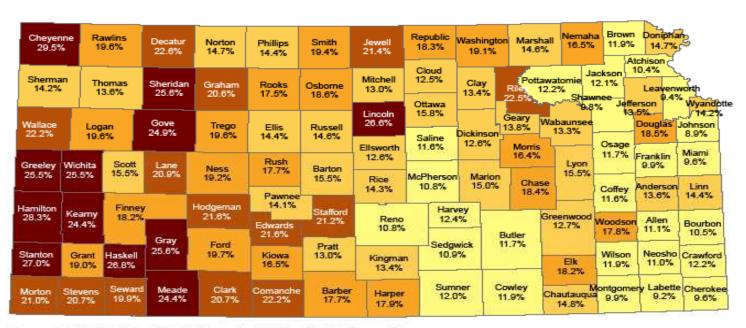
# Number of uninsured increases

- Kansas statewide uninsured rate of 12.5%
  - About 340,000 uninsured in 2006-7
  - One of only 10 states with rising rate of uninsured in 2007
- Young Adults 19-24 uninsured at more than twice that rate
  - About 28% uninsured in 2006-7
- Adults 19-34 make up 42% of the uninsured
  - About 143,000 uninsured in 2006-7
- No publicly-financed coverage of non-disabled childless adults
  - About 143,000 uninsured in 2006-7
- Medicaid coverage of parents up to 30% of poverty or less
  - Kansas ranks in the bottom 10 for coverage of parents
  - Proposals to expand to 100%FPL in 2009 using revenue from an increase in taxes on tobacco products
  - In 2008, Kansas Legislature revoked a planned expansion to at least 50% of FPL



## Where are the uninsured in Kansas?

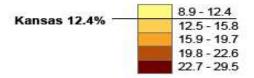
Percent of People Under 65 without Health Insurance by Kansas County 2005



Source: Institute for Policy & Social Research; data from the U.S. Census Bureau, Small Area Health Insurance Estimates, 2005.



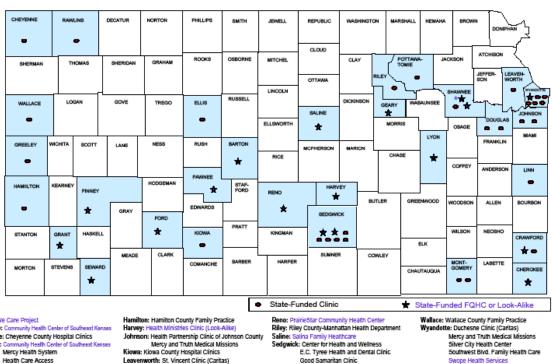
#### Percent Uninsured





### **Safety Net Clinic locations in Kansas**

#### 2009 State-funded Clinic Sites by County



Barton: We Care Project

Cherokee: Community Health Center of Southeast Kansas Cheyenne: Cheyenne County Hospital Clinics Crawford: Community Health Center of Southeast Kansas

Douglas: Health Care Access Heartland Clinic

Ellis: First Care Clinic Finney: United Methodist Mexican-American Ministries Ford: United Methodist Mexican-American Ministries Geary: Konza Prairie Community Health Center Grant: United Methodist Mexican-American Ministries

Greeley: Greeley County Family Practice

Linn: Mercy Health System Lyon: Flint Hills Community Health Center Montgomery: Mercy Health System Montgomery County Community Clinic

Pottawatomie: Community Health Ministry Rawlins: Rawlins County Health Department GraceMed Health and Dental Clinic Guadalupe Clinic Healthy Options Clinic Hunter Health Clinic

Seward: United Methodist Mexican-American Ministries Shawnee: Marian Clinics Shawnee County Health Agency

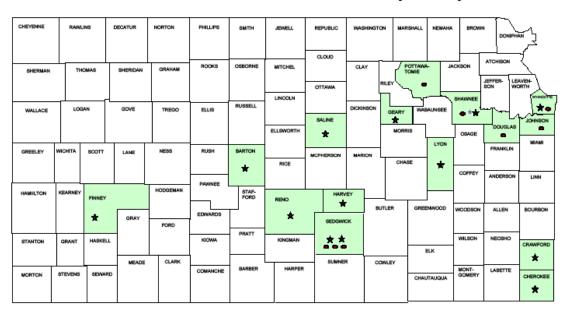
Turner House Children's Clinic

'Statewide: Kansas Statewide Farmworker Health



# Medicaid Dental Providers in Kansas

#### 2009 State-funded Dental Clinic Sites by County



Barton: We Care Projec

Cherokee: Community Health Center of Southeast Kansas Crawford: Community Health Center of Southeast Kansas

Douglas: Health Care Access

Finney: United Methodist Mexican-American Ministries Geary: Konza Prairie Community Health Center Harvey: Health Ministries Clinic (Look-Alike) Johnson: Health Partnership Clinic of Johnson County

Lyon: Flint Hills Community Health Center Pottawatomie: Community Health Ministry Reno: PrairieStar Community Health Center Saline: Salina Family Healthcare

Sedgwick: Center for Health and Wellness E.C. Tyree Health and Dental Clinic GraceMed Health and Dental Clinic

Healthy Options Clinic Hunter Health Clinic Shawnee: Marian Clinics

Wyandotte: Southwest Blvd. Family Health Care

Swope Health Services

\*Statewide: Kansas Statewide Farmworker Health Program



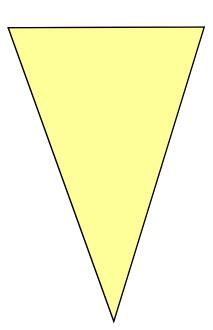
# Health Reform Recommendations 2009



### KHPA Health 2009 Reform Recommendations

# Implement statewide clean indoor law:

Save lives & save health care costs



### Increase tobacco user fees:

Prevent smoking & use funds for affordable health care

### Increase access to affordable health care and prevention:

Making smart investments, Investing in the future



#### Statewide Clean Indoor Air Law

#### Save lives and save health care costs

- Smoking is No. 1 cause of preventable death and disease in Kansas
  - 3,000 cancer deaths and 35,000 heart disease deaths per year in U.S.
- There is no safe level of exposure to secondhand smoke
  - Pregnant women at risk of having low birth weight babies
  - Infants at risk of asthma attacks, lower respiratory infections, reduced lung capacity
- Potential 10% reduction in smoking rate: 40,000 fewer smokers in Kansas
- KDHE estimates 2,160 fewer heart attacks
- \$21 million decrease in hospital charges from heart attacks alone.



#### Increase Tobacco User Fees

### Prevent smoking & use funds for affordable health care

- Increase cigarette taxes \$0.75 per pack; other tobacco taxes by proportionate amount
- Kansas Medicaid spends \$196 million per year on smoking-related illnesses
- Current tax: \$0.79 per pack. Last raised in 2002.
   Average in U.S. is \$1.03
- Reduce smoking, especially among youth
- \$87.4 million new revenue to expand health care coverage for low-income, young adults and small businesses



### Increase access to affordable health care and prevention

#### Making smart investments, investing in the future

#### **Expanding Medicaid to cover Low Income Parents/Caretakers**

- Kansas currently in bottom 10 states for covering low-income adults
  - Current income limit for single parent with two children: \$403 per month (Topeka);less than 30% FPL
  - No coverage for childless, non-disabled adults
- 2008 Federal Poverty Guidelines:
  - \$1,166/mo. (2-person family); \$1,467/mo. (3-person family)
- Estimated 75,000 uninsured adults below FPL;
  - 45% are parents of children under age 18 (Kansas Health Institute)
- Expected enrollment increase: 30,531 by SFY 2013
- Budget Impact SFY 2010: \$31 million (AF); \$10.5 million (SGF)



#### Assist Small Businesses, Young Adults to Afford Health Insurance

- Most adults with insurance (65%) obtain it through their employer:
  - 1.5 million in Kansas
- Size matters:
  - 95% of employees in large firms are offered health benefits, but only 40% of workers in small firms are offered health benefits
- Age matters:
  - Nearly one-quarter of young adults (age 18-25) are uninsured
- Cost is major factor for both:
  - Small groups = High rates
  - Young adults: Cost vs. risks, benefits



## Statewide Community Health Record

- Health Information Information and Exchange:
  - Facilitate sharing, exchange of health records
  - Promote safety and improve quality
  - Improve efficiency and promote cost savings
- Two ongoing pilot projects
  - Wichita: HealthWave managed care providers
  - KC Area: State employees participating in employer sponsored initiative
- Expand statewide for Medicaid and SEHP
- Budget Impact FY 2010: \$1,096,000 (AF);
   \$383,600 (SGF)



# Promoting Prevention: Cancer screening; School health; Workplace wellness

- Expand early detection cancer screenings
  - Breast and cervical (EDW Program)
  - Colorectal
  - Prostate
- Continue, Expand Kansas Coordinated School Health
  - First 5 years: 80,736 students; 234 schools; 39 counties
  - Expand: add 40 more districts
- Launch Workplace Wellness for Small Businesses
  - Start-up grants; technical assistance



# Improve Tobacco Cessation in Medicaid

- Estimated 66,500 Kansas smokers in KS Medicaid
- KS Medicaid: \$196 million/year for smokingrelated illnesses
- Mirror State Employee Health Plan
  - Cover individual and/or group counseling
- Budget Impact FY 2010: \$450,000 (AF);
   \$200,000 (SGF)
- Savings: Reduce current cost of smokingrelated illnesses



# Improving outcomes and promoting cost effectiveness

### Acknowledge budget issues by investing in long term

#### Health reform goals:

- Improve health of all Kansans and control future costs
- Promote prevention, personal responsibility
- Expand access to both private and public health insurance

#### Medicaid transformation goals:

- Improve health of Medicaid beneficiaries, improve quality of program, and control costs
- Use data to inform program reviews, recommendations, program investments, and cost cutting

17



http://www.khpa.ks.gov